

DECLARATION and POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **ARM GUARD FOR PREVENTING RAPTOR NESTING**, the specification of which is attached hereto unless the following box is checked:

™ was filed on _____ as U.S. Application No. _____ or PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Application No. _____ Country _____ Filing Date _____
Priority Claimed (Yes/No) _____

POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) the power to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Name: John C. Andrade Registration No: 31,919

Send correspondence and direct telephone calls to: John C. Andrade Tel. No. (302) 678-3262
P.O. Box 598, Dover, DE 19903

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

INVENTOR(S)

Full Name Last Name First Name
Middle Name

of Inventor: Harvey, James A.

Signature (Please sign full name):

Date:

Residence & City State or Foreign Country Country of Citizenship
Citizenship: Greensboro Maryland USA

Post Office Post Office Address City State or Country Zip Code
Address 12751 Greensboro Road Greensboro Maryland 21639

Full Name Last Name First Name Middle Name
of Inventor:

Signature (Please sign full name):

Date:

Residence & City State or Foreign Country Country of Citizenship
Citizenship: USA

Post Office Post Office Address City State or Country Zip Code
Address